

JAN 16 2006

PTO/SB/97 (09-04)

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Request for Continued Examination (RCE) Transmittal (1 page, in duplicate)
Fee Transmittal (1 page, in duplicate)
Request for One-Month Extension of Time (1 page)
Preliminary Amendment (16 pages)

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McNees Wallace & Nurick LLC
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Client #22177-0023

FAX COVER LETTER

DATE: January 16, 2006

PLEASE DELIVER THE FOLLOWING PAGES:

TO: Mail Stop RCE
Commissioner for Patents

FAX: (571) 273-8300

FROM: Theodore R. West

Direct Dial: (717) 235-5349

TOTAL NUMBER OF PAGES, INCLUDING THIS COVER LETTER: 23

MESSAGE:

In re U.S. Patent Application No. 10/623,833, Filed July 21, 2003, by Rotondo, et al.
Please deliver this RCE to Examiner K. Suchecki, Group Art Unit 2882

FAX NUMBER:

SECRETARY RESPONSIBLE: K. Sauter

TELEPHONE: (717) 237-5327

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PTO/SB/17 (12-04v2)

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4010).**FEE TRANSMITTAL**
For FY 2005☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)

910.00

Complete if Known

Application Number	10/623,833
Filing Date	July 21, 2003
First Named Inventor	ROTONDO, et al.
Examiner Name	SUCHECKI
Art Unit	2882
Attorney Docket No.	22177-0023

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 50-1059 Deposit Account Name: McNees Wallace & Nurick

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 20 or HP = _____ x _____ = _____

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 3 or HP = _____ x _____ = _____

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
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- 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____

4. OTHER FEE(S)

Non-English Specification. \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Request for Continued Examination; One-Month Extension of Time

910

SUBMITTED BY

Signature		Registration No (Attorney/Agent)	46,401	Telephone	(717) 232-8000
Name (Print/Type)	Brian T. Sattizahn, Esq.			Date	January 16, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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